



TRANSMITTAL FORM

Application Serial Number	09/973,562
Filing Date	October 9, 2001
First Named Inventor	Desmond
Group Art Unit	3738
Examiner Name	William H. Matthews
Attorney Docket No.	BSC-186
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] | <input type="checkbox"/> Formal Drawing(s) | <input type="checkbox"/> Appeal Brief (in triplicate) |
| | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal | <input type="checkbox"/> Status Inquiry |
| | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) | <input checked="" type="checkbox"/> Return Receipt Postcard |
| | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 |
| <input checked="" type="checkbox"/> Petition for Extension of Time | <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application | <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 |
| <input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations | <input type="checkbox"/> Small Entity Statement | <input type="checkbox"/> Additional Enclosure(s) (please identify below) |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD(s) for large table or computer program | |
| <input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Amendment After Allowance | |
| | <input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <input type="checkbox"/> Certificate of Correction (in duplicate) | |

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TECHNOLOGY CENTER R3700

CORRESPONDENCE ADDRESS

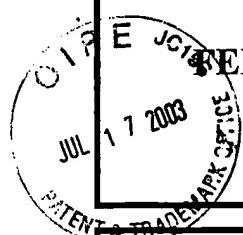
SIGNATURE BLOCK

Direct all correspondence to: Patent Administrator
 Testa, Hurwitz & Thibeault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

Date: July 15, 2003
 Reg. No. 50,773
 Tel. No.: (617) 248-7453
 Fax No.: (617) 248-7100

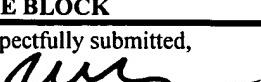
Respectfully submitted,

Mark L. Plotoborodov
 Attorney for Applicants
 Testa, Hurwitz & Thibeault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110



**EE TRANSMITTAL
FY 2003**

Complete if Known	
Application Serial Number	09/973,562
Filing Date	October 9, 2001
First Named Inventor	Desmond
Group Art Unit	3734
Examiner Name	William H. Matthews
Attorney Docket No.	BSC-186

METHOD OF PAYMENT		FEE CALCULATION (continued)			
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES			
		Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.					
3. <input type="checkbox"/> Applicant claims small entity status.					
FEE CALCULATION					
1. FILING FEE					
Large Entity					
Fee (\$)	Fee Description	Fee Paid			
750	Utility filing fee	<input type="text"/>			
330	Design filing fee	<input type="text"/>			
160	Provisional filing fee	<input type="text"/>			
		Number Filed	Number Extra	Rate	Amount
Total Claims		- 20 =		x \$ 18.00 =	
Independent Claims		- 3 =		x \$ 84.00 =	
<input type="checkbox"/> Multiple Dependent Claim(s), if any				\$280.00 =	
TOTAL: SMALL ENTITY DISCOUNT: SUBTOTAL (1) <input type="text"/> (\$)					
2. AMENDMENT CLAIM FEES					
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	
Total	-	=	x \$ 18.00 =	<input type="text"/>	
Indep.	-	=	x \$ 84.00 =	<input type="text"/>	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =	<input type="text"/>	
TOTAL: <input type="text"/> (\$) SMALL ENTITY DISCOUNT: <input type="text"/> (\$) SUBTOTAL (2) <input type="text"/> (\$)					
CORRESPONDENCE ADDRESS			SIGNATURE BLOCK		
Direct all correspondence to:			Respectfully submitted,  Mark L. Beloborodov Attorney for the Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110		
Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100			Date: July 15, 2003 Reg. No.: 50,773 Tel. No.: (617) 248-7453 Fax No.: (617) 248-7100		
RECEIVED <input type="text"/> SUBTOTAL (3) <input type="text"/> (\$) 110.00 JUL 23 2003 TECHNOLOGY CENTER R3700 SUBTOTAL (1) <input type="text"/> SUBTOTAL (2) <input type="text"/> SUBTOTAL (3) <input type="text"/> 110.00 TOTAL <input type="text"/> (\$) 110.00					



3734\$

PATENT
Attorney Docket No. BSC-186
(1002/1227)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Desmond *et al.*

SERIAL NO.: 09/973,562 GROUP NO.: 3734

FILING DATE: October 9, 2001 EXAMINER: William H. Matthews

TITLE: PROSTATIC STENT AND DELIVERY SYSTEM

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 15th day of July, 2003.


Brenda T. Kowalcuk

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

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JUL 23 2003

Submitted herewith is/are:

TECHNOLOGY CENTER R3700

1. Transmittal Form (1 pg.),
2. Fee Transmittal (1 pg.);
3. Petition for Extension of Time (1 pg.);
2. Amendment and Response (14 pgs.),
4. Check in the amount of \$110.00; and
3. A return receipt postcard